Pediatric and Primary Lymphedema

Cellulitis/erysipelas

Children and adults with lymphatic impairment have a much higher risk of developing cellulitis/erysipelas. The clinical signs of erysipelas are: high fever (39-40°C) of sudden onset, with rigors, a ‘flu-like’ or unwell feeling, followed by redness, warmth, and increased volume of the affected limb. Sometimes additional treatment is necessary, depending on the diagnosis.

WHAT IS RECOMMENDED

• Awareness of the first signs and symptoms of cellulitis.
• Prompt treatment of cellulitis / erysipelas with systemic antibiotics.
• Consider hospitalization in case of a young child and/or marked illness.
• Proper skincare and good compression treatment.
• Prompt treatment of interdigital fungal infections (Athletes foot) and eczema.
• Take preventive measures such as good hygiene following injury or insect bite: clean with soap and water and disinfect using topical antiseptic cream.
• Provide antibiotics for the patient to use if they feel that they are starting to develop cellulitis.
• Consider preventive long-term use of antibiotics in children/adults with recurrent cellulitis (≥ 2 episodes per year).

WHAT YOU SHOULD NOT DO

• Ignore the increased swelling.
• Stop wearing garments or low-stretch bandages. The patient may need to take off their compression materials for the first 2 days because of pain and/or discomfort in the acute phase, but they should be reintroduced as soon as possible or the lymphedema will deteriorate.
• Take antibiotics without clear signs of cellulitis/erysipelas.